

## Form CPF 18A: Report of Independent Expenditure Promoting Election or Defeat of Candidate(s)

## Office of Campaign and Political Finance

| of Massachusotts                                                     |                  |                                                                                             | 1,                                |                                       |                                             |
|----------------------------------------------------------------------|------------------|---------------------------------------------------------------------------------------------|-----------------------------------|---------------------------------------|---------------------------------------------|
| Office of Campaign and Po<br>One Ashburton Place<br>Boston, MA 02108 | olitical Finance |                                                                                             |                                   | N                                     | 2<br>(84<br>2<br>4                          |
| (617) 727-8352.                                                      |                  |                                                                                             | 0.1 71 -                          | TARRA                                 |                                             |
| 1. Date of Report:                                                   |                  | COLO OD in compared                                                                         |                                   |                                       |                                             |
|                                                                      |                  | (Must be filed within 7 business days of expenditure(s) in excess of \$100.00 in aggregate) |                                   |                                       |                                             |
|                                                                      |                  |                                                                                             |                                   |                                       |                                             |
| 2. Expenditure(s) Made By:                                           |                  | Massachusetts Nurses Association (Name of individual or group making expenditure)           |                                   |                                       |                                             |
| •                                                                    |                  | (Name                                                                                       | of individual or group making exp | ,                                     |                                             |
|                                                                      |                  | 0.4.0 m                                                                                     |                                   | Canton                                | 02021                                       |
|                                                                      |                  | 340 Turnpike St., Canton Zip Street Address City/Town Zip                                   |                                   |                                       |                                             |
|                                                                      |                  | 127,W507 C                                                                                  | * v                               |                                       |                                             |
| a Name of Con                                                        | didate(s) For    | Whom the Abov                                                                               | ve Expenditure(s) Election or     | Defeat Promoted:                      | a a                                         |
| 3. Name of Can                                                       | iluate(s) i oi   | ( )                                                                                         | . 5 1 10                          | Lita Dan                              |                                             |
|                                                                      |                  | Sarah Peake / State fep                                                                     |                                   |                                       |                                             |
| ,                                                                    |                  |                                                                                             |                                   |                                       |                                             |
|                                                                      |                  |                                                                                             | (9)                               |                                       |                                             |
|                                                                      | #0<br>- 2        |                                                                                             |                                   | # · · ·                               | 20 77 8                                     |
| 4. Expenditure(                                                      | c).              |                                                                                             |                                   | 9 <b>10</b> 2                         |                                             |
| 4. Expenditure                                                       | 37.              |                                                                                             |                                   |                                       | · ·                                         |
|                                                                      |                  |                                                                                             | a                                 | · · · · · · · · · · · · · · · · · · · | Amount                                      |
| Date Paid                                                            | To W             | nom Paid                                                                                    | Address                           | Purpose                               | 7.4                                         |
| Date Faid                                                            |                  | - 1 1                                                                                       | 39 Main St.                       | Dount AD:                             | 1116:48                                     |
| 10/31/06                                                             | Cape Coc         | & Times                                                                                     |                                   | Drivet 1                              |                                             |
|                                                                      |                  |                                                                                             | Hyannis 02601                     | . `                                   | 1.                                          |
| 10.10.                                                               | Saltus           | Press'                                                                                      | 24 Solma Rd                       | mailing                               | 160,27                                      |
| 10/27/06                                                             | saltus           | PICSO                                                                                       |                                   |                                       | 100                                         |
|                                                                      |                  | E 24                                                                                        | Worcester MADIO                   | 04                                    |                                             |
|                                                                      |                  |                                                                                             |                                   |                                       |                                             |
|                                                                      |                  |                                                                                             |                                   |                                       | 2 B                                         |
|                                                                      |                  |                                                                                             | lenendent expenditures, as de     | efined by M.G.L. c.55, section        | 18A:                                        |
| I hereby certify                                                     | the expenditur   | res noted are int                                                                           | rependent expenditures, as        |                                       |                                             |
| 1900 American acres                                                  | and the Control  | . مراه ماه ما                                                                               | wanditure(s) described here       | in did not solicit or receive any     | contributions in                            |
| (1) the individua                                                    | al(s) or group   | who made the                                                                                | a                                 |                                       | . 24                                        |
| contemplati                                                          | on of such exp   | penditure(s), an                                                                            | u                                 | in did not cooperate consult o        | r act in concert with                       |
| (2) the individu                                                     | al(s) or group   | who made the                                                                                | dideta or political committee     | e organized on behalf of any ca       | andidate, or any                            |
| or at the rec                                                        | juest or sugge   | stion of any car                                                                            | included of political committee   | e organized on behalf of any ca       | 980                                         |
| agent of a c                                                         | andidate or ar   | ny political com                                                                            | mittee in making such expen       | 2101-0(0).                            |                                             |
|                                                                      |                  |                                                                                             |                                   | (6)                                   | ₽                                           |
| I further certify                                                    | that all staten  | nents made here                                                                             | in are true and accurate.         | , ·                                   |                                             |
|                                                                      |                  |                                                                                             |                                   |                                       |                                             |
| Signed under t                                                       | he penalties (   | of perjury:                                                                                 |                                   | **                                    | * ***                                       |
|                                                                      | 3                | , i                                                                                         | ſ Ka                              | atrina Anderson                       |                                             |
| 126                                                                  | In land          | 9/2                                                                                         | D = D                             | irector, Legislation a                | nd Government Affa:                         |
| VAINANGL                                                             | Malva            | W V                                                                                         | 10 100                            | Name of Individual Signer and         | Title (if signing on                        |
| Signature                                                            | . 0              | M2                                                                                          | Date Print                        | of a group)                           | , S. C. |
| Digimicaro                                                           |                  |                                                                                             | ELUMINITE A MINISTRALIA           | of a group)                           |                                             |
| 50                                                                   |                  |                                                                                             | 140121 100 7110.                  | positive so or                        |                                             |